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CONFIRMATION NO. 3696

<b>SERIAL NUMBER</b> 10/508,336	<b>FILING OR 371(c) DATE</b> 12/01/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1617	<b>ATTORNEY DOCKET NO.</b> 117-524	
<b>APPLICANTS</b> Philip John Birch, Cambridge, UNITED KINGDOM; Ann Gail Hayes, Cambridge, UNITED KINGDOM; Peter James Watts, Nottingham, UNITED KINGDOM; Jonathan David Castile, Nottingham, UNITED KINGDOM;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB03/01183 03/19/2002					
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0206448.3 03/19/2002 UNITED KINGDOM 0225040.5 10/28/2002 UNITED KINGDOM 0225041.3 10/28/2002 UNITED KINGDOM 0225042.1 10/28/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 23117					
<b>TITLE</b> BUPRENORPHINE FORMULATIONS FOR INTRANASAL DELIVERY					
<b>FILING FEE RECEIVED</b> 3152	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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